

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HA</i>	<i>70291</i>	<i>8/10/</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>8/14/</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>hm</i>	<i>64330</i>	<i>9-9</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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Claim	Date
Final Original	
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
staple additional sheet here

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